


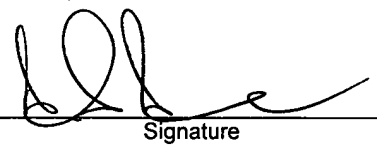
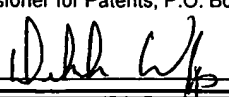
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AF/1642
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PTO/SB/31 (08-03)

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|---|---|--|---------------------------|
| NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES | | Docket Number (Optional) 511582002100 | |
|  | In re Application of Daniel E. H. AFAR, et al. | | |
| | Application Number 09/697,206 | | Filed October 26, 2000 |
| | For NOVEL GENE UPREGULATED IN CANCERS OF THE PROSTATE | | |
| | Art Unit 1642 | | Examiner M. Davis |
| Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner. | | | |
| The fee for this Notice of Appeal is (37 CFR 1.17(b)) | | \$ 330.00 | |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: | | \$ 165.00 | |
| <input type="checkbox"/> A check in the amount of the fee is enclosed. | | | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | | | |
| <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet. | | | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>03-1952</u> (PTO/SB/17) is attached to this submission in duplicate. I have enclosed a duplicate copy of this sheet. Fee Transmittal form | | | |
| <input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed. | | | |
| I am the | | | |
| <input type="checkbox"/> applicant /inventor | |  Signature David L. Devernoe Typed or printed name (858) 720-7943 Telephone number 5/17/04 Date | |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) | | | |
| <input type="checkbox"/> attorney or agent of record. Registration number _____ | | | |
| <input checked="" type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). <u>50,128</u> | | | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. | | | |
| <input type="checkbox"/> *Total of <u>1</u> forms are submitted. | | | |
| I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EL 961009507 US, in an envelope addressed to: MS AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below. Dated: May 17, 2004 Signature:  (Deborah Wykes) | | | |

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